

H.R. 712, a bill to direct the Secretary of Veterans Affairs to carry out a clinical trial of the effects of cannabis on certain health outcomes of adults with chronic pain and post-traumatic stress disorder, and for other purposes

As ordered reported by the House Committee on Veterans' Affairs on March 12, 2020

By Fiscal Year, Millions of Dollars	2020	2020-2025	2020-2030
Direct Spending (Outlays)	0	0	0
Revenues	0	0	0
Increase or Decrease (-) in the Deficit	0	0	0
Spending Subject to Appropriation (Outlays)	*	*	not estimated
Statutory pay-as-you-go procedures apply?	No	Mandate Effects	
Increases on-budget deficits in any of the four consecutive 10-year periods beginning in 2031?	No	Contains intergovernmental mandate?	No
		Contains private-sector mandate?	No

* = between zero and \$500,000.

H.R. 712 would require the Department of Veterans Affairs (VA) to conduct and support research related to the use of medical cannabis to treat veterans with chronic pain, post-traumatic stress disorder (PTSD), and other health conditions. The bill also would require VA to report to the Congress on its plan to implement that requirement.

On February 1, 2019, VA began a 5-year research study at its medical center in San Diego, California, to evaluate effects of the use of medical cannabis among 136 participants with PTSD and other health conditions. The department plans to spend \$1 million to conduct the study. CBO expects that trial would satisfy the bill's requirement for research. Satisfying the reporting requirement would cost less than \$500,000 over the 2020-2025 period, CBO estimates. That spending would be subject to the availability of appropriated funds.

Section 2 of the bill would require VA to authorize physicians and other health care providers employed by the department to provide recommendations and opinions on the use of medical marijuana to veterans who live where its use is legal under state law. Under current policy, health care providers at VA discuss various treatment options with their patients in the course of providing health care. Additionally, VA encourages physicians to



discuss marijuana use with patients who participate in state-approved marijuana programs. Thus, CBO estimates that providing information on medical marijuana would not increase VA's costs to provide health care to veterans.

On March 25, 2020, CBO transmitted a [cost estimate for H.R. 1647](#), the Veterans Equal Access Act, as ordered reported by the House Committee on Veterans' Affairs on March 12, 2020. Similar to section 2, H.R. 1647 would require medical professionals at VA to discuss medical marijuana as a treatment option with certain patients. CBO estimates that implementing those provisions would not affect the federal budget.

The CBO staff contact for this estimate is Ann E. Futrell. The estimate was reviewed by Leo Lex, Deputy Director of Budget Analysis.